



Bib Data Sheet


UNITED STATES DEPARTMENT OF COMMERCE
Patent and Trademark Office

 Address: COMMISSIONER OF PATENTS AND TRADEMARKS
 Washington, D.C. 20231

SERIAL NUMBER 09/454,124	FILING DATE 12/03/1999	CLASS 455	GROUP ART UNIT 2749	ATTORNEY DOCKET NO. 40725.830063
RULE -				

APPLICANTS

JORMA ANTERO SEPPANEN, IRVING, TX ;

**** CONTINUING DATA *********** FOREIGN APPLICATIONS *********IF REQUIRED, FOREIGN FILING LICENSE GRANTED ******** 01/06/2000**

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY TX	SHEETS DRAWING 4	TOTAL CLAIMS 16	INDEPENDENT CLAIMS 3
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged	Examiner's Signature _____	Initials _____		

ADDRESS
 EARL C HANCOCK
 HOLLAND & HART LLP
 555 17TH STREET STE 3200
 P O BOX 8749
 DENVER, CO 80201
TITLE

SIGNAL QUALITY INDICATOR APPARATUS AND METHOD PARTICULARLY USEFUL FOR MOBILE TELEPHONES

FILING FEE RECEIVED 890	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees
		<input type="checkbox"/> 1.16 Fees (Filing)
		<input type="checkbox"/> 1.17 Fees (Processing Ext. of time)
		<input type="checkbox"/> 1.18 Fees (Issue)
		<input type="checkbox"/> Other _____
		<input type="checkbox"/> Credit



UNITED STATES PATENT AND TRADEMARK OFFICE

COMMISSIONER FOR PATENTS
UNITED STATES PATENT AND TRADEMARK OFFICE
WASHINGTON, D.C. 20231
www.uspto.gov



Bib Data Sheet

CONFIRMATION NO. 3390

SERIAL NUMBER 09/454,124	FILING DATE 12/03/1999 RULE	CLASS 455	GROUP ART UNIT 2681	ATTORNEY DOCKET NO. 40725.830063
APPLICANTS JORMA ANTERO SEPPANEN, IRVING, TX; <i>12</i>				
** CONTINUING DATA ***** <i>12</i>				
** FOREIGN APPLICATIONS ***** <i>15</i>				
IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** 01/06/2000				
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Verified and Acknowledged <i>Properly</i> Examiner's Signature Initials		STATE OR COUNTRY TX	SHEETS DRAWING 4	TOTAL CLAIMS 16
				INDEPENDENT CLAIMS 3
ADDRESS 23990				
TITLE SIGNAL QUALITY INDICATOR APPARATUS AND METHOD PARTICULARLY USEFUL FOR MOBILE TELEPHONES				
FILING FEE RECEIVED 890	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	